

January 2026

Dear Customer,

Thank you for choosing Analog Devices.

Attached is your New Customer Information Packet, which we've prepared to support the supplier setup process within your systems.

Please take a moment to review the contents. The documents listed below are included to ensure a smooth onboarding experience.

Thank you,
Analog Devices

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List of Contacts

- Accounting **Email:** creditreview@analog.com
- Corporate Responsibility **Email:** ethics.compliance@analog.com
- To Submit for Net 30 Credit Terms **Submit:** [ERAM](#)
- Eshop Support **Ordering Website:** [Worldwide eShop | Analog Devices](#) **Customer Service Portal:** [Customer Service · Support Portal \(analog.com\)](#)

Company Information

- **Corporate HQ Address:**
Analog Devices, Inc.
One Analog Way Wilmington, MA 01887, USA
- **Congressional District:** 6
- **DUNS:** 001418417 (D&B)
- **UEID:** X6LJRH3LG266
- **FEIN (ADI Tax ID or TIN):** 04-2348234
- **CAGE CODE:** 24355
- **NAICS:** 334413
- **SIZE STD:** 1250 (LARGE)
- For specific site certifications, refer to Analog Devices website: [Quality Certificates](#)
- For Quality Management Systems, refer to Analog Devices website: [Quality Systems](#)

Important: Revised Banking Information Announcement



Analog Devices, Inc.
One Analog Way
Wilmington, MA 01887, USA
Tel: 781.935.5565
analog.com

October 16, 2025

Dear Valued Customer,

We hope this message finds you well. We are writing to inform you of a recent update to our banking information that will take effect **January 29, 2026**.

Please note the following revised banking details for future transactions:

- Bank Name: PNC Bank, N.A.
- Bank Address: 500 First Ave., Pittsburgh, PA 15219
- Account Name: Analog Devices, Inc.
- SWIFT (international Only): PNCCUS33
- ABA (Domestic): 031207607
- Account number: 8180199614

Lockbox address for regular mail		Lockbox address for courier packages
ANALOG DEVICES INC		PNC BANK C/O ANALOG DEVICES INC
PO BOX 719120		LOCKBOX NUMBER 719120
CHICAGO IL 60677-9344		350 EAST DEVON AVE
		ITASCO IL 60143

Please update your records accordingly and ensure that all future payments are directed to the new account starting from the effective date mentioned above. Separate remittance details should continue to be sent via email to **NARemit@analog.com**. All ACH payments should be sent in **CTX format and contain remittance details**. We appreciate your prompt attention to this matter.

If you have any questions or require further assistance, please do not hesitate to contact Christelle Milojkovic, Director Credit, Collections and Accounts Receivable at Christelle.Milojkovic@analog.com.

Sincerely,

Michael Sondel
Corporate VP and Chief Accounting Officer
Analog Devices, Inc

California Resale Certificate

I HEREBY CERTIFY:

1. I hold valid seller's permit number: _____

2. I am engaged in the business of selling the following type of tangible personal property:

3. This certificate is for the purchase from Analog Devices of the item(s) I have
listed in paragraph 5 below. [Vendor's name]

4. I will resell the item(s) listed in paragraph 5, which I am purchasing under this resale certificate in the form of tangible personal property in the regular course of my business operations, and I will do so prior to making any use of the item(s) other than demonstration and display while holding the item(s) for sale in the regular course of my business. I understand that if I use the item(s) purchased under this certificate in any manner other than as just described, I will owe use tax based on each item's purchase price or as otherwise provided by law.

5. Description of property to be purchased for resale:

6. I have read and understand the following:

For Your Information: A person may be guilty of a misdemeanor under Revenue and Taxation Code section 6094.5 if the purchaser knows at the time of purchase that he or she will not resell the purchased item prior to any use (other than retention, demonstration, or display while holding it for resale) and he or she furnishes a resale certificate to avoid payment to the seller of an amount as tax. Additionally, a person misusing a resale certificate for personal gain or to evade the payment of tax is liable, for each purchase, for the tax that would have been due, plus a penalty of 10 percent of the tax or \$500, whichever is more.

NAME OF PURCHASER

SIGNATURE OF PURCHASER, PURCHASER'S EMPLOYEE OR AUTHORIZED REPRESENTATIVE



PRINTED NAME OF PERSON SIGNING

TITLE

ADDRESS OF PURCHASER

TELEPHONE NUMBER

()

DATE



AHEAD OF WHAT'S POSSIBLE™

1 Analog Way
Wilmington, MA 01887

Ship to Customer:	
Email address:	US.taxdepartment@analog.com

Blanket Exemption/Resale Certificate

If you intend this to be a Single Purchase Certificate rather than a Blanket Certificate, please check this box ☐

Name of Company: _____

Company Address: _____

City and State: _____

Permit or Registration Number: _____

If no Permit or Registration Number, provide the reason one is not required: _____

The purchaser named above, claims an exemption from payment of sales and use taxes for the purchase of the items described below:

Seller: Analog Devices, Inc.

Address: Wilmington, MA USA

Description of items to be purchased: Electronic components and accessories

Description of the type of business activity generally engaged in or type of items normally sold by the purchaser:

Reason items purchased are not taxable:

_____ Purchased for resale

_____ Will become an ingredient or component part of tangible personal property manufactured for ultimate sale

_____ Others (describe) _____

I certify that if any property of service so purchased tax free is used or consumed by the firm as to make it subject to Sales and Use Tax, we will pay the tax due directly to the proper taxing authority when state law so provides or inform the seller for added tax billing. I further understand that it is a criminal offense to give exemption/resale certificate to the seller for taxable items that I know, at the time of purchase or will be use in a manner other than that expressed in the certificate.

Signature of purchaser: _____

Title: _____

Date: _____

** To qualify in Texas, items purchased for resale must be resold within the geographical limits of the United States, it's territories, possessions or Mexico.*

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the
requester. Do not
send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) Analog Devices, Inc.		
	2 Business name/disregarded entity name, if different from above		
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. ☐ Individual/sole proprietor ☒ C corporation ☐ S corporation ☐ Partnership ☐ Trust/estate ☐ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. ☐ Other (see instructions)		4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) 5 Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) ☐ (Applies to accounts maintained outside the United States.)
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions ☐		
	5 Address (number, street, and apt. or suite no.). See instructions. 1 Analog Way		Requester's name and address (optional)
	6 City, state, and ZIP code Wilmington, MA 01887		
	7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number
or
Employer identification number
04-2348234

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person **Cathy Polk** Print name and title (if other than individual)

Date **1/5/2026**

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they